



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 9005

<b>SERIAL NUMBER</b> 10/726,343	<b>FILING or 371(c) DATE</b> 12/02/2003 <b>RULE</b>	<b>CLASS</b> 602	<b>GROUP ART UNIT</b> 3764	<b>ATTORNEY DOCKET NO.</b> ACIZ-P01-004		
<b>APPLICANTS</b> G. W. Johnson III, Boca Raton, FL; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/430,414 12/03/2002 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 03/02/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/GLENN E RICHMAN/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> ROPES & GRAY LLP PATENT DOCKETING 39/41 ONE INTERNATIONAL PLACE BOSTON, MA 02110-2624 UNITED STATES						
<b>TITLE</b> Orthopedic appliance with moisture management system						
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			